

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application

Inventor(s): Gluckman et al.

Appln. No.: 09/910,461

Confirm. No.: 2772

Filed: July 20, 2001

Title: COMPOSITION AND METHODS TO
IMPROVE NEURAL OUTCOMEPATENT APPLICATION

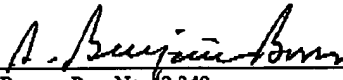
Art Unit: 1639

Examiner: Bennett M Celsa

Customer No. 23910

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8

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 (Attorney Signature)
D. Benjamin Borson, Reg. No. 42,349
Signature Date: December 16, 2003

RESPONSE TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted with this communication in connection with the above-identified application are the following:

- _____ A Response under 37 C.F.R. §1.111 to the Office Action dated _____.
- X A Response under 37 C.F.R. §1.116 to the Office Action dated October 16, 2003.
- _____ A Petition for an Extension of Time under 37 C.F.R. §1.136.
- _____ Applicant(s) qualify for small entity status under 37 C.F.R. §1.27.
- _____ An Information Disclosure Statement pursuant to 37 C.F.R. §1.56.

The fee associated with this communication has been calculated as shown below:

- _____ No fee is required with this communication.
- _____ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established.
- _____ A fee for extension of time for response under 37 C.F.R. §1.136 filed within _____ month(s) after the original time for response of \$_____ is due.
- _____ A fee of \$180.00 is due for the submission of the accompanying Information Disclosure Statement.
- X _____ A fee for addition of claims under 37 C.F.R. §1.16 is due as follows:

FEES	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	Rate Small Entity/Other Than Small Entity	Total
TOTAL CLAIMS (37 CFR 1.16(c))	<u>37</u> *	<u>36</u> **	_____	X \$ 9.00 X \$ 18.00	\$ 9.00
INDEPENDENT CLAIMS (37 CFR 1.16(b))	_____ *	_____ ***	_____	X \$ 43.00 X \$ 86.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$145.00 + \$290.00	\$
				TOTAL	\$ 9.00

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number of Previously Paid For" in this space is less than 20, enter "20".

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✓ The Commissioner is hereby authorized to charge any deficiencies or credit overpayment to Deposit Account No. 06-1325. A duplicate copy of this authorization is enclosed.

Respectfully submitted,

Date: December 16, 2003

By: *D. Benjamin Borson*

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DATE: December 16, 2003 Total Pages : 25

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